

**KATTEN MUCHIN ROSENMAN LLP**

525 West Monroe Street  
Chicago, IL 60661-3693  
312.902.5200 office 312.902.1061 fax.

**Facsimile**

To	Company	Fax Number	Phone Number
Mail Stop Amendment - Commissioner for Patents	USPTO	(703) 872-9306	
		<b>RECEIVED CENTRAL FAX CENTER</b>	
Date	Client/Matter Number		
June 24, 2005	211552-00050		
From	Attorney Number		
John S. Paniaguas	32347		
Phone	Fax		
312.902.5312	312.577.4532		
Total number of pages, including cover letter: pages If you do not receive all of the pages, please call: 312.902.5312			

**Comments**

RE: Patent Application No: 10/732,942  
Filing Date: December 11, 2003  
Inventor: Rita L. Faunce, et al.  
Title: Battery Charger Indicator  
Confirmation No.: 7274

Please file the attached.  
Transmittal Form (1 p.)  
Fee Transmittal Form (1 p.)  
Amendment (6 pp.)  
Patent Application Fee Determination Record (1 p.)  
Petition for Extension of Time (2 p.) in duplicate

**RECEIVED  
OIPE/IAP**

**JUN 27 2005**

**Certificate of Transmission**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO addressed to Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on June 24, 2005.

  
Mary T. Champion

**For Messenger Department Use Only**

Your fax has been sent. Attached is your original.

Date \_\_\_\_\_ Time \_\_\_\_\_

Signature \_\_\_\_\_

**Important**

This facsimile transmission contains information intended for the exclusive use of the individual or entity to whom it is addressed and may contain information that is proprietary, privileged, confidential and/or exempt from disclosure under applicable law.

If you are not the intended recipient (or an employee or agent responsible for delivering this facsimile transmission to the intended recipient), you are hereby notified that any copying, disclosure or distribution of this information may be subject to legal restriction or sanction. Please notify the sender by telephone to arrange for the return or destruction of the information and all copies.

Chicago New York Los Angeles Washington, DC Charlotte Palo Alto Newark [www.kmr.com](http://www.kmr.com)

A Law Partnership including Professional Corporations

Doc #CH01 (211552-00050) 50288717v1 06/24/2005/Time: 13:04

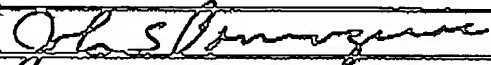
PTO/SB/21 (08-04)

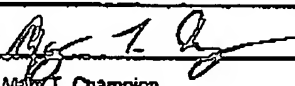
Approved for use through 07/31/2003 ON 0851-0031  
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>TRANSMITTAL FORM</b>  <small>(to be used for all correspondence after initial filing)</small>	Application Number	10/732,942	
	Filing Date	December 11, 2003	
	First Named Inventor	Fournco, Rita L., et al	
	Art Unit	2838	
	Examiner Name	LWA. Lawrence W.	
Total Number of Pages in This Submission	8	Attorney Docket Number	211553-00050

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavit/Declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD  <input type="text"/> Remarks	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	Katten Muchin Rosenman LLP	
Signature		
Printed name	John S. Paraguss	
Date	June 24, 2005	Reg. No. 31,051

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.		
Signature		
Typed or printed name	Molly T. Champion	Date June 24, 2005

This collection of information is required by 37 CFR 1.5. This information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing this form, call 1-800-PTO-9199 and select option 2

PTO/SB/17 (12-04-03)  
Approved for use through 07/31/2003 OMB 0351-0032  
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE  
Under the Patent and Trademark Act of 1986, no person can receive an award in violation of information unless a disclosure is made under a patent number.

Effective on 12/06/2004.  
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4018).

# FEE TRANSMITTAL For FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 120.00

Complete if known

Application Number 10/732,942

Filing Date December 11, 2005

First Named Inventor Faunce, Rita L., et al.

Examiner Name Luk, Lawrence W.

Art Unit 2838

Agency Doc# No. 211552-00050

JUN 24 2005

## METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify):

☒ Deposit Account Deposit Account Number 50-1214 Deposit Account Name Katten Muchin Rosenman

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below

☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17

☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-8893.

## FEE CALCULATION

### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

### 2. EXCESS CLAIM FEES

Fee Basis:

Each claim over 20 (including Reissues)

Fee (\$)

Small Entity Fee (\$)

Each independent claim over 3 (including Reissues)

50

25

Multiple dependent claims

200

100

Total Claims

Excess Claims

Fee (\$)

Fees Paid (\$)

Multiple Dependent Claims

Fee (\$)

Fees Paid (\$)

- 20 or HP =

x

=

=

HP = highest number of total claims paid for, if greater than 20.

Independent Claims

Excess Claims

Fee (\$)

Fees Paid (\$)

- 3 or HP =

x

=

=

HP = highest number of independent claims paid for, if greater than 3.

### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets

Excess Sheets

Number of each additional 50 or fraction thereof

Fee (\$)

Fees Paid (\$)

- 100 =

/ 50 =

(round up to a whole number) x

=

=

### 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Fees Paid (\$)

Other (e.g., late filing surcharge): One Month Extension of Time for Patent Response to Office Action

120.00

## SIGNED BY

Signature

*John S. Panagoulas*

Registration No. (Attorney/Agent)

31,051

Telephone 312-502-5312

Name (Print/Type)

John S. Panagoulas

Date June 24, 2005

This collection of information is required by 37 CFR 1.132. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing this form, call 1-800-PTO-8199 and select option 2